U.S. Palent and Trademark Officer the Personal Reduction Act of 1995, no personal are required to respond to a collection of information unterported to the PATENT APPLICATION FEE DETERMINATION RECORD Sublittude for Form PTO-875 Effective December 8, 2004							Application of Docket Humber		
API	PLICATION AS FI	LED - PART I					•	OTHE	R THAN
	(Column 1)		· (Column 2)		SMALL ENTITY		. OR		ENTITY
FOR .	HUMBERFILE	D NUM	BER EXIRA		RATE (\$)	FEE (I)		RATE (\$)	FEE (1)
ASIC FEE 17 CFR 1 10(0) (15) = (c))	NA		NIA]	NVA .	150.00	1	N/A	300.00
BARCH FEE 17 OFR 1"16(N. 14. or 1m)	. NA		NIA	1	N/A	\$260	·,	· N/A	\$800
XAMINATION FEE	NA		N/A		NA	\$100			-
otal Clahas		<u> </u>				4100	· ·	N/A	\$200
DEPENDENT CLAIMS	menus	50		1	X\$ 25 .		OR	X\$50 .	
CFR 1 (6(N))] [X100 .			X200 .	
PRICATION SIZE SE . It 16(4) If the specification and sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or		the application	size fee due	Ιł	•			••	
		small entity) to	r each		٠.				.
	35 U.S.C. 41(a)(1)(G) and 37 CI	FR 1.16(s).	ŀ					
ULTIPLE DEPENDENT CLAIM PRESENT DT CFR I 16(III					. 4160=		•	+360=	
the difference in colur	nn 1 is less then zero. «	nier o in column	12.		TOTAL		, (7	
•	• •	i.		•	TOTAL E	······		TOTAL .	
1.4	ATION AS AMENE	JEU - PARTI	<u>!</u>	•	· .		· .		• .
NE /	Column 1)	(Column 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
9250p =	CLAIMS EMAINING	HIGHEST	PRESENT		RATE (S)	ADDI:	ſ		
1/00 UP A	AFTER MENDMENT	PREVIOUSLY PAID FOR	EXTRA					RATERL	ADD.
		THISTORY	J	L		TIONAL FEE (S)	: 1	RATE (\$)	- ADO(- TIONAL
CH CHR LINES	15 Minus	20	-		X\$ 25 .	TONAL FEE (1)	^ 	ΑΑΤΕ (\$) X\$\$0.	
Total extern users Independent a extern users	15 Minus	- 20		ŀ	X\$ 25 . X100 .		\ OF \ 2		TIONAL
OF CFR LINCE	Minus	-20		ŀ			OR OR	X\$50	TIONAL
Independent Strong Application Strong	Minus	20 3		ŀ			ント	X\$50	TIONAL
Independent Strong Application Strong	Minus 0 (37 CFR 1.16(s))	20 3			X100		OR OR	X\$50 . X200 . 4360±	TIONAL
STOPA LINGS STOPA LINGS STOPA LINGS STOPA LINGS PRESENTATIO	Minus o (37 CFR 1.16(s)) N OF MATIPLE DEPEND	en claim pro	FR 1.86@)		X100		OR OR	X\$50 . X200 .	TIONAL
Application Site Fer	Minus 10 (37 CFR 1.16(s)) N OF MULTIPLE DEPEND COlumn 1)	(Column 2)	(Column 3)		X100 4160= TOTAL ADD'L FEE		OR OR	X\$50 X200 43604 TOTAL ADD'L FEE	TIONAL
SHOPPICATE STATE OF THE SENTENCE OF THE SENTEN	Minus (17 CFR 1.16(s)) NOF MULTIPLE DEPEND COLUMN 1) CLAIMS EMAINING AFTER	(Column 2) HIGHEST NUMBER PREVIOUSLY	FR 1.86@)		X100		OR OR	X\$50 . X200 . 4360±	TIONAL FEE (f)
STOPA LINENS Subspendent STOPA LINENS Application Size Fee PRIST PRESENTATIO RE (C) (C) (C) Total	Minus Q17 CFR 1.16(s)) N OF MATIPLE DEPEND CLAIMS MAINING AFTER ENOMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		X100	ADDI-	OR OR	X\$50 X200 4360± TOTAL ADO'L FEE	TIONAL FEE (1)
Enfericed Stroke Leads Stroke L	Minus 10 (37 CFR 1.16(s)) N OF MULTIPLE DEPEND COLUMN 1) CLAIMS EMAINING AFTER ENDMENT Minus Minus Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		X100 4180= TOTAL ADDL FEE (RATE (3) X\$ 25	ADDI- TIONAL FEE (5)	OR OR	X\$50 X200 43604 TOTAL ADD'L FEE RATE (1)	ADOI-TIONAL
Endependent Strope Application Strope Con Lung C	Minus OTO CFR 1.16(s)) NOF MARTIPLE DEPEND COLAIMS EMANING AFTER. ENOMENT Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		X100	ADDI- TIONAL FEE (5)	OR OR	X\$50 X200 4360± TOTAL ADO'L FEE	ADOI-TIONAL
STOPAL LINES Bridependent STOPAL LINES Application Size Fee PREST PRESENTATIO (C) (C) (C) (C) (C) (C) (C) (C	Minus O (37 CFR 1.16(s)) N OF MULTIPLE DEPEND COLUMN 1) CLAIMS EMAINING AFTER ENOMENT Minus (37 CFR 1.16(s))	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		X100 4180= TOTAL ADDL FEE (RATE (1) X\$ 25 X100	ADDI- TIONAL FEE (5)	OR OR OR	X\$50 X200 1360 ² TOTAL ADD'L FEE RATE (\$) X\$50 X200	ADOI-TIONAL
GRICAL LINES Bridependent Application Stre Fed PREST PRESENTATIO (C) (C) (C) (C) (C) (C) (C) (C	Minus OTO CFR 1.16(s)) NOF MARTIPLE DEPEND COLAIMS EMANING AFTER. ENOMENT Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR 20 TO 3	(Column 3) PRESENT EXTRA		X100 4180= TOTAL ADDL FEE (RATE (3) X\$ 25	ADDI- TIONAL FEE (5)	OR OR OR	X\$50 X200 43604 TOTAL ADD'L FEE RATE (1)	ADDI-TIONAL

• If the entry in column 1 is less than the entry in column 2, write "V' in column 3.

*** If the "Highest Number Previously Paid For IN THES SPACE is less than 20, enter "2".

*** If the "Highest Number Previously Paid For IN THES SPACE is less than 20, enter "2".

*** The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1, to be in the previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1, to be in the public which is to file (and by the Proviously Paid For (Total or Independent) is required to obtain or retain a benefit by the public which is to file (and by the Proviously an application. Confidentially is governed by 35 U.S.O. 122 and 37 OFR 1.14. This collection is estimated to take 12 minutes to complete. Along patheting, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments a amount of this you require to complete this form and/or suggestions for reducing this bunder, should be sent to the Chief Indemnation Office, U.S. Patient Indemnation Indemnation Indemnation

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.